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Local for Progressis Respection Act of 1885, no persons are medical to respond to a substitute of Information and the Information as a said OAB control purpose. Application Number 10/710,437 **REVOCATION OF POWER OF** Filing Date July 11, 2004 **ATTORNEY WITH** First Named Inventor Ye-Shen LIN **NEW POWER OF ATTORNEY** Art Unit 2817 AND Examiner Name Kimberly Le. GLENN CHANGE OF CORRESPONDENCE ADDRESS Attorney Docket Number

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I hereby revoke all pravious powers of attorney given in the above-identified application.								
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Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
Signature Musicalla L								
Name	IMB Yu-Yang Chih ( President )							
Date		1.27 2006			laphona	02-696B-18		
NOTE: Segratures of all the inventors or sentiment of record of the entire interest printer representative(s) are required. Subtril multiple forms if more than one								
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STATEMENT UNDER 37 CFR 3.73(b)							
Applicant/Patent Owner: CHI MEI COMMUNICATION SYSTE	MS, MC.						
Application No./Patent No.: 10/710,437 Filed/	Issue Date:	July 11, 2004					
Entried: DIPLEXER FORMED IN MULTI-LAYERED SUBSTRATE							
CHIMEL COMMUNICATION SYSTEMS, INC. , 8 (Name of Assignee) (Ty		rporation, padhership, University, government agency, etc.)					
etates that it is:  1.  the assignee of the entire right, title, and interest; or							
<ol> <li>an assignee of less than the entire right, title and integer.</li> <li>The extent (by percentage) of its ownership interest in</li> </ol>	rest. E%						
in the patent application/patent identified above by virtue of (	ither:						
All assignment from the inventor(s) of the patent appling the United States Patent and Trademark Office at R thereof is attached.  OR  B. A chain of title from the inventor(s), of the patent appliance.	301 <u>014834</u>	, Frame 0167, or for which a copy					
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he undersigned (whose title is supplied below) is authorized	to act on behalf of	the assignee. U					
- Marin april		<u> </u>					
Signature		<sup>*</sup> Dale					
Printed or Typed Name		02-6989-1999 Zolostano Municipal					
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